

(11-16-00)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | 94. | | 10/13/00 |
| O.I.P.E. CLASSIFIER | 59 | 1019 | |
| FORMALITY REVIEW | LLT | 571 | 11/13/00 |
| RESPONSE FORMALITY REVIEW | QD | 11(D) | - |

INDEX OF CLAIMS

| | | | |
|---------------------|------------|---|--------------|
| ✓ | Rejected | N | Non-elected |
| = | Allowed | I | Interference |
| — (Through numeral) | Canceled | A | Appeal |
| ÷ | Restricted | O | Objected |

| Claim | Final | Original | Date |
|-------|-------|----------|------|
| 1 | ✓ | ✓ | ✓ |
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| Claim | Final | Original | Date |
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| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions
stap additional sheet here

(LEFT INSIDE)